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PATENT

ATTORNEY DOCKET NO. 01942-00008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Eija Pirhonen, Jan Nieuwenhuis,
Auvo Kaikkonen, Tuomo Nieminen, and
Franz Weber

7/a
Examiner: Carlos A. Azpuru

Art Unit: 1615

Serial No.: 10/006,800

Filed: December 4, 2001

Title: RESORBABLE POLYMER COMPOSITION
IMPLANT AND METHOD OF MAKING
IMPLANT

BeA
8-12-03

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

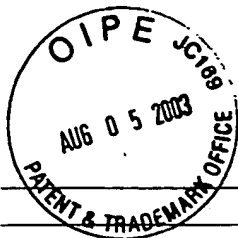
This is in response to the Office Action dated May 7, 2003 (Paper No. 5). Kindly
reconsider the application in view of the following amendments and remarks.

Please amend the claims in accordance with the "Claim Listing" which begins at page 2
of this paper.

USSN 10/006,800
Amendment and Response to Office Action dated May 7, 2003
Express Mail Receipt: EV 323344285 US

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08-06-03

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P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

In regard to the above identified application, we are transmitting herewith the attached:

1. Amendment and Response to Office Action, and
2. Return postcard.

With respect to additional fees:

☐ A. No additional fee is required.

☒ B. An additional fee is required and has been calculated as shown below:

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CLAIMS AS AMENDED						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	20	Minus	20	0	X \$9	= \$0.00
Indep. Claims	10	Minus	4	6	X \$42	= \$252.00
			Total Additional Claims Fees		\$252.00	
Petition/Request for Extension of Time			0 months		\$0.00	
			Total Additional Fees for this Amendment		\$252.00	

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** Each multiple dependent claim should be counted as the number of claims from which it depends.

_____ C. Attached is a check in the amount of \$_____.

X D. The Commissioner is hereby authorized to charge the total additional fee of \$252.00 to our Deposit Account No. 19-0733. A duplicate copy of this sheet is enclosed.

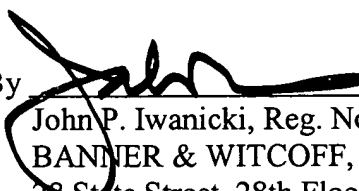
_____ E. The Commissioner is hereby authorized to charge the Petition fee of \$_____ to Deposit Account No. 19-0733.

The Commissioner is hereby authorized to charge any additional fees or credit overpayment to Deposit Account No. 19-0733.

Respectfully submitted,

Dated: August 5, 2003

By


John P. Iwanicki, Reg. No. 34,628
BANNER & WITCOFF, LTD.
28 State Street, 28th Floor
Boston, MA 02109
(617) 720-9600

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